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PTO/SB/05 (4/98)

Approved for use through 09/30/2000 OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. CFP-1080	
(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))		First Inventor Bobby HU	
		Title	Biasing Arrangement for a Pawl of a Reversible Ratchet-type Wrench
Express Mail Label No. EM389556400US		Assistant Commissioner for Patent	
ADDRESS TO:		Box Patent Application Washington DC 20231	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			
<div>1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)</div> <div>2. <input checked="" type="checkbox"/> Specification Total Pages (18) (preferred arrangement set forth below)<ul style="list-style-type: none">- Descriptive title of the invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure</div> <div>3. <input checked="" type="checkbox"/> Formal Drawing(s) (35 U.S.C. 113) Total Sheets (11)</div> <div>4. <input checked="" type="checkbox"/> Oath or Declaration<ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d))<ul style="list-style-type: none">i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</div> <div>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</div> <div>6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary)<ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies</div>			
ACCOMPANYING APPLICATION PARTS			
<div>7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</div> <div>8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</div> <div>9. <input type="checkbox"/> English Translation Document (if applicable)</div> <div>10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</div> <div>11. <input type="checkbox"/> Preliminary Amendment</div> <div>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</div> <div>13. <input checked="" type="checkbox"/> *Small Entity <input type="checkbox"/> Statement filed in prior application Statement(s) Status still proper and desired (PTO/SB/09-12)</div> <div>14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</div> <div>15. <input type="checkbox"/> Other:</div>			
*NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).			
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.: _____ Prior application information: Examiner: _____ Group / Art Unit: _____ For CONTINUATION or DIVISIONAL only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
17. CORRESPONDENCE ADDRESS			
<input type="checkbox"/> Customer No. or Bar Code Label		or <input type="checkbox"/> Correspondence address below	
(insert Customer No. or Attach bar code label here)			
Address		Oppenheimer Wolff & Donnelly LLP 45 South Seventh Street 3400 Plaza VII	
City	Minneapolis	State	Minnesota
Country	USA	Telephone	612-607-7539
Name (Print/Type)	Alan D. Kamrath	Zip Code	55402
Registration No. (Attorney/Agent)	28,227	Fax	612-607-7100
Signature	<i>Alan D. Kamrath</i>	Date	April 3, 2000

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FEE TRANSMITTAL
for FY 1999

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 and 1.28.

Complete if Known

TOTAL AMOUNT OF PAYMENT

(\$)

555

Application Number

Filing Date

First Named Inventor

Bobby Hu

Examiner Name

Group / Art Unit

Attorney Docket No.

CFP-1080

METHOD OF PAYMENT (check one)

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit
Account
Number

15-0627

Deposit
Account
Name☐ Charge Any Additional Fee Required
Under 37 CFR §§ 1.16 and 1.17

- 2.
- ☐
- Payment Enclosed:

☐ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Fee Fee Fee Fee Description
Code (\$) Code (\$) Code (\$)

101 760 201 380 Utility filing fee

106 310 206 155 Design filing fee

107 480 207 240 Plant filing fee

108 760 208 380 Reissue filing fee

114 150 214 75 Provisional filing fee

Fee Paid

345

SUBTOTAL (1) (\$)

345

2. EXTRA CLAIM FEES

Total Claims	39	-20** =	19	X	Fee from below	=	171	Fee Paid
Independent Claims	4	-3** =	1	X		=	39	
Multiple Dependent						=		

**or number previously paid, if greater; For Reissues, see below

Large Entity Small Entity

Fee Fee Fee Fee Fee Description
Code (\$) Code (\$) Code (\$)

103 18 203 9 Claims in excess of 20

102 78 202 39 Independent claims in excess of 3

104 260 204 130 Multiple dependent claim, if not paid

109 78 209 39 ** Reissue independent claims over original patent

110 18 210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

210

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Fee Fee Fee
Code (\$) Code (\$) Code (\$)

Fee Description

Fee Paid

105 130 205 65 Surcharge - late filing fee or oath

127 50 227 25 Surcharge - late provisional filing fee or cover sheet.

139 130 139 130 Non-English specification

147 2,520 147 2,520 For filing a request for reexamination

112 920* 112 920* Requesting publication of SIR prior to Examiner action

113 1,840* 113 1,840* Requesting publication of SIR after Examiner action

115 110 215 55 Extension for reply within first month

116 380 216 190 Extension for reply within second month

117 870 217 435 Extension for reply within third month

118 1,360 218 680 Extension for reply within fourth month

128 1,850 228 925 Extension for reply within fifth month

119 300 219 150 Notice of Appeal

120 300 220 150 Filing a brief in support of an appeal

121 260 221 130 Request for oral hearing

138 1,510 138 1,510 Petition to institute a public use proceeding

140 110 240 55 Petition to revive - unavoidable

141 1,210 241 605 Petition to revive - unintentional

142 1,210 242 605 Utility issue fee (or reissue)

143 430 243 215 Design issue fee

144 580 244 290 Plant issue fee

122 130 122 130 Petitions to the Commissioner

123 50 123 50 Petitions related to provisional applications

126 240 126 240 Submission of Information Disclosure Stmt

581 40 581 40 Recording each patent assignment per property (times number of properties)

146 760 246 380 Filing a submission after final rejection (37 CFR § 1.129(a))

149 760 249 380 For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

Other fee (specify)

SUBTOTAL (3) (\$)

* Reduced by Basic Filing Fee Paid

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)

Alan Kamrath

Registration No.
(Attorney/Agent)

28,227

Telephone

612-607-7539

Signature

Alan Kamrath

Date

04/03/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.